

COMPLAINT FORM

(for filers who are prisoners without lawyers)

IN THE UNITED STATES DISTRICT COURT
FOR THE southern DISTRICT OF Indiana

(Full name of plaintiff(s))

Timothy Gabbard

FILED

MAR 18 2020

US DISTRICT COURT
NEW ALBANY DIVISION

vs

Case Number:

1 , 20-CV- 906 SEB-TAB

(Full name of defendant(s))

(to be supplied by clerk of court)

Sheriff Asher

Lt. Christmas

Deputy Miller

A. PARTIES

1. Plaintiff is a citizen of _____ and is located at _____
(State)

(Address of prison or jail)

(If more than one plaintiff is filing, use another piece of paper).

2. Defendant _____
(Name)

(Full Name of Defendants)

Deputy Clark

Deputy Tones

Deputy Dismukes

Deputy Spann #1

Deputy Spann #2

Deputy Penrod

Deputy Hintz

Deputy Newby

Deputy Childers

Deputy Grimm

Deputy Swick

Deputy Peterson

2. Defendant Asher worked for Howard county Jail, 1800 W. Markland, Kokomo, IN 46901
Defendant Christmas worked for Howard county Jail, 1800 W. Markland, Kokomo, IN 46901
Deputy Miller worked for Howard county Jail, 1800 W. Markland, Kokomo, IN 46901
Deputy Clark worked for HCS, 1800 W. Markland, Kokomo, IN 46901
Deputy Tomes worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Dismukes worked for HCS, 1800 W markland, Kokomo, IN 46901
Deputy Spann #1 worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Spann #2 worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Penrod worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Hintz worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Newby worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Childers worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Grimm worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Swick worked for HCS, 1800 W Markland, Kokomo, IN 46901
Deputy Peterson worked for HCS, 1800 W Markland, Kokomo, IN 46901

is (if a person or private corporation) a citizen of _____
(State, if known)

and (if a person) resides at _____
(Address, if known)

and (if the defendant harmed you while doing the defendant's job)

worked for Howard county jail, Kokomo, IN 46901
(Employer's name and address, if known)

(If you need to list more defendants, use another piece of paper.)

B. STATEMENT OF CLAIM

On the space provided on the following pages, tell:

1. Who violated your rights;
2. What each defendant did;
3. When they did it;
4. Where it happened; and
5. Why they did it, if you know.

Around 2-15-20 Plaintiff got his jaw broken in the Howard county jail. On 3-5-20 Plaintiff was prescribed medicine for pain. On each day from 3-5-20 until 3-11-20 Defendants Miller, Clark, Tomes, Dismukes, Spann #1, Spann #2, Penrod, Hintz, Newby, Childers, Grimm, Swick, and Peterson denied Plaintiff his medicine and when the Defendants were informed of the Doctors orders for medicine they ignored all requests. ~~Defendants~~ Defendants Asher and Christmas allowed their deputies to do so because they believe inmates shouldnt have any rights and

they think they are above the law.

C. JURISDICTION

☒ I am suing for a violation of federal law under 28 U.S.C. § 1331.

OR

☐ I am suing under state law. The state citizenship of the plaintiff(s) is (are) different from the state citizenship of every defendant, and the amount of money at stake in this case (not counting interest and costs) is \$_____.

D. RELIEF WANTED

Describe what you want the court to do if you win your lawsuit. Examples may include an award of money or an order telling defendants to do something or stop doing something.

I want to be monetarily compensated for
the continuous pain I was subjected to. I
want Defendants Asher, Christmas, and Spann #1 demoted.
I want Deputys Miller, Clark, Peterson, Dismukes,
and Hintz fired. I want the rest of the
Deputys/Defendants educated on inmate rights and
proper procedure